In re	David R Kendziora, Sr.	According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
Case N	lumber:	■ The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		\square Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. RE	PORT OF INC	COME					
	Marital/filing status. Check the box that applies and com	plete the balanc	e of this part of this state	ment	as directed.			
1	a. Unmarried. Complete only Column A ("Debtor's In	••						
	b. Married. Complete both Column A ("Debtor's Inc	ome") and Col	umn B ("Spouse's Incor	ne'')	for Lines 2-10.			
	All figures must reflect average monthly income received				Column A	Column B		
	calendar months prior to filing the bankruptcy case, ending			Debtor's	Spouse's			
	the filing. If the amount of monthly income varied during six-month total by six, and enter the result on the appropri	you must divide the		Income	Income			
2	Gross wages, salary, tips, bonuses, overtime, commission		\$	0.00	\$			
	Income from the operation of a business, profession, or		T : 1. f T : 1	Ψ	0.00	Ψ		
	enter the difference in the appropriate column(s) of Line 3							
	profession or farm, enter aggregate numbers and provide of	letails on an atta	achment. Do not enter a					
2	number less than zero. Do not include any part of the bu	isiness expense	s entered on Line b as					
3	a deduction in Part IV.	Debtor	Spouse					
	a. Gross receipts \$	0.00						
	b. Ordinary and necessary business expenses \$	0.00						
		ct Line b from		\$	0.00	\$		
	Rents and other real property income. Subtract Line b							
	the appropriate column(s) of Line 4. Do not enter a numb							
4	part of the operating expenses entered on Line b as a do							
4	a. Gross receipts \$	Debtor 0.00	Spouse					
	b. Ordinary and necessary operating expenses \$	0.00						
	, , , , , , , , , , , , , , , , , , , ,	act Line b from	'	\$	0.00	\$		
5	Interest, dividends, and royalties.			\$	0.00	\$		
6	Pension and retirement income.			\$	4,121.50	\$		
	Any amounts paid by another person or entity, on a reg							
7	expenses of the debtor or the debtor's dependents, inclu							
/	purpose. Do not include alimony or separate maintenance debtor's spouse. Each regular payment should be reported							
	listed in Column A, do not report that payment in Column	\$	0.00	\$				
	Unemployment compensation. Enter the amount in the approximation of the amount in the amount in the approximation of the amount in the approximation of the amount in th							
	However, if you contend that unemployment compensation							
8	benefit under the Social Security Act, do not list the amou or B, but instead state the amount in the space below:	nt of such comp	ensation in Column A					
	1		1					
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$	0.00 Spo	ouse \$	\$	0.00	¢		
	The a benefit under the Social Security Act	эээ г	,	Ф	0.00	Φ		

9	Income from all other sources. Specify sour on a separate page. Total and enter on Line 9. maintenance payments paid by your spouse separate maintenance. Do not include any be payments received as a victim of a war crime, international or domestic terrorism.	. Do not included by the contraction of the contr	include alimony ude all other pay ceived under the	or separate ments of alimon Social Security A	y or			
			Debtor	Spouse				
	a. Military Reserve	\$	785.40					
	b. Disability VA	\$	127.00			\$ 912.	40 \$	
10	Subtotal. Add Lines 2 thru 9 in Column A, ar in Column B. Enter the total(s).					\$ 5,033.	90 \$	
11	Total. If Column B has been completed, add I the total. If Column B has not been completed					\$		5,033.90
	Part II. CALCULAT	ION O	F § 1325(b)(4)	COMMITM	IENT I	PERIOD	1	
12	Enter the amount from Line 11						\$	5,033.90
13	Marital Adjustment. If you are married, but a calculation of the commitment period under § enter on Line 13 the amount of the income list the household expenses of you or your dependence income (such as payment of the spouse's tax lidebtor's dependents) and the amount of income on a separate page. If the conditions for enter a. b. c. Total and enter on Line 13	1325(b)(4) ted in Lind dents and stability or ne devoted	4) does not require 10, Column B to specify, in the line the spouse's supplet to each purpose.	the inclusion of the that was NOT paid es below, the base out of persons of If necessary, list	e income d on a reg is for exc her than t t addition	of your spouse, gular basis for cluding this the debtor or the	¢.	0.00
	Total and enter on Line 13						\$	0.00
14	Subtract Line 13 from Line 12 and enter the	e result.					\$	5,033.90
15	Annualized current monthly income for § 1 enter the result.	325(b)(4)	• Multiply the an	nount from Line 1	14 by the	number 12 and	\$	60,406.80
16	Applicable median family income. Enter the information is available by family size at www	v.usdoj.go	ov/ust/ or from the	clerk of the banl	kruptcy c			
	a. Enter debtor's state of residence:	NY	b. Enter deb	tor's household s	ıze:	1	\$	47,381.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitmen top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable committed at the top of page 1 of this statement and continue with this statement. 							
	Part III, APPLICATION OF	F § 1325(l	b)(3) FOR DETE	ERMINING DIS	POSABI	LE INCOME	1	
18							\$	5,033.90
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a							
	C. Total and enter on Line 19.		\$					
20	Current monthly income for § 1325(b)(3). S	Subtract I :	ine 10 from Line	18 and anter the	ecult		\$	0.00
20	Content monthly medite for § 1525(0)(3). S	aouact Li	inc 17 Hom Line	10 and enter the l	Court.		\$	5,033.90

21		Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.					\$	60,406.80
22	Appli	cable median family incon	e. Enter the amount from	m Lin	ne 16.		\$	47,381.00
	Appli	ication of § 1325(b)(3). Che	ck the applicable box ar	nd pro	oceed as directed.			· · ·
23	1323(b)(3) at the top of page 1 of this statement and complete the femanting parts of this statement.							ınder §
	☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is no 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part							
		Part IV. C	ALCULATION (OF I	DEDUCTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ds of the Internal Reve	nue Service (IRS)		
24A	Enter applic bankr	inal Standards: food, appar in Line 24A the "Total" ame table number of persons. (T uptcy court.) The applicable ur federal income tax return	ount from IRS National his information is availa number of persons is the	Standable ar	lards for Allowable Living t <u>www.usdoj.gov/ust/</u> or from ther that would currently b	Expenses for the om the clerk of the e allowed as exemptions	\$	565.00
24B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.					onal Standards for able at cable number of persons of are 65 years of age or ory that would currently ional dependents whom and enter the result in and enter the result in Line 24B.		
	Perso	ons under 65 years of age		Pers	sons 65 years of age or old	ler		
	a1.	Allowance per person	60	a2.	Allowance per person	144		
	b1.	Number of persons	1	b2.	Number of persons	0		
	c1.	Subtotal	60.00		Subtotal	0.00	\$	60.00
25A	Utiliti availa the nu	Standards: housing and uses Standards; non-mortgage able at www.usdoj.gov/ust/camber that would currently be dditional dependents whom	expenses for the applic or from the clerk of the b be allowed as exemption	able o ankrı	county and family size. (That place is a possible court). The applicable	nis information is e family size consists of	\$	459.00
r	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.							
25B	availa the nu any ad debts	able at www.usdoj.gov/ust/ of the that would currently be diditional dependents whom secured by your home, as stater an amount less than zero.	mortgage/rent expense for from the clerk of the both allowed as exemption you support); enter on Lated in Line 47; subtractero.	or you bankru s on y Line b t Line	ar county and family size (uptcy court) (the applicable your federal income tax return the total of the Average Met b from Line a and enter the	this information is family size consists of turn, plus the number of fonthly Payments for any		
25B	availa the nu any ad debts not er	able at www.usdoj.gov/ust/ of the that would currently be diditional dependents whom secured by your home, as stater an amount less than zero. IRS Housing and Utilities	mortgage/rent expense for from the clerk of the both allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/ren	or you oankru s on y Line b t Line	ar county and family size (to apticy court) (the applicable your federal income tax reto the total of the Average Metable before Line a and enter the total of the Average Metable before Line a side of the Average Metable before Line and enter the Line of the Average Metable before Line and Entertain Line and	this information is family size consists of turn, plus the number of fonthly Payments for any		
25B	availa the nu any ac debts not er a. b.	able at www.usdoj.gov/ust/ of the that would currently be dittional dependents whom secured by your home, as stater an amount less than zee IRS Housing and Utilities Average Monthly Payment home, if any, as stated in I	mortgage/rent expense for from the clerk of the bee allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/rent for any debts secured beine 47	or you oankru s on y Line b t Line	ar county and family size (to apticy court) (the applicable your federal income tax reto the total of the Average Merb from Line a and enter the total of the same and enter the total of the same same same same same same same sam	this information is family size consists of turn, plus the number of tonthly Payments for any the result in Line 25B. Do 855.00 0.00		
25B	availa the nu any ac debts not en	able at www.usdoj.gov/ust/ of the that would currently be dittional dependents whom secured by your home, as stater an amount less than zero. IRS Housing and Utilities Average Monthly Payment home, if any, as stated in I Net mortgage/rental expensions.	mortgage/rent expense for from the clerk of the beer allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/rent for any debts secured beine 47 see	or you oankru s on y ine b t Line nt exp	ar county and family size (Inptcy court) (the applicable your federal income tax returned to the total of the Average Merb from Line a and enter the total of the Subtract Line b from Line and Enter Lin	chis information is a family size consists of turn, plus the number of tonthly Payments for any the result in Line 25B. Do 855.00 0.00 om Line a.	\$	855.00
25B	availa the nu any ad debts not er a. b. c.	able at www.usdoj.gov/ust/ of the that would currently be dittional dependents whom secured by your home, as stater an amount less than zee IRS Housing and Utilities Average Monthly Payment home, if any, as stated in I	mortgage/rent expense for from the clerk of the beer allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/rent for any debts secured beine 47 se tilities; adjustment. If the allowance to which	or you bankru s on y ine b t Line t exp by you you c you a	ar county and family size (to apticy court) (the applicable your federal income tax reto the total of the Average Me b from Line a and enter the total of the Average Me b from Line a federal income tax reto the total of the Average Me b from Line a and enter the sense set are entitled under the IRS Federal from the total of the	chis information is a family size consists of turn, plus the number of tonthly Payments for any the result in Line 25B. Do 855.00 0.00 om Line a. out in Lines 25A and Housing and Utilities	\$	855.00

1	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the				
	regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are				
27A	included as a contribution to your household expenses in Line 7.				
	If you checked 0, enter on Line 27A the "Public Transportation" amo				
	Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in th Census Region. (These amounts are available at www.usdoj.gov/ust/	e "Operating Costs" amount from I e applicable Metropolitan Statistic	cal Area or	\$	278.00
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)			\$	0.00
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an ownership/lease expense)				
	vehicles.) \blacksquare 1 \square 2 or more.				
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Little result in Line 28. Do not enter an amount less than zero.	court); enter in Line b the total of	the Average		
	a. IRS Transportation Standards, Ownership Costs	\$	517.00		
	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$	148.66		
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	1 10100	\$	368.34
	the "2 or more" Box in Line 28.	e 2. Complete this Line only if you			
29		e IRS Local Standards: Transporta court); enter in Line b the total of	ation the Average		
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. [a. IRS Transportation Standards, Ownership Costs]	e IRS Local Standards: Transporta court); enter in Line b the total of	ation the Average		
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a	ation the Average a and enter		
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a	ation the Average a and enter	\$	0.00
30	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a subtract Line b from Line a subtract Line b from Line a.	ation the Average a and enter 0.00 0.00 all federal,	\$	0.00
	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Litthe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a \$\\$\\$\\$\\$\\$\\$\\$\\$\ Subtract Line b from Line a. expense that you actually incur for accome taxes, self employment taxes es taxes.	ation the Average a and enter 0.00 0.00 all federal, s, social		
30	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Litthe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a \$\\$\$ Subtract Line b from Line a. Expense that you actually incur for acome taxes, self employment taxes es taxes. Int. Enter the total average monthly retirement contributions, union duntary 401(k) contributions. Inthly premiums that you actually p	ation the Average a and enter 0.00 0.00 all federal, s, social ly lues, and ay for term	\$	500.00
30	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Litthe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu Other Necessary Expenses: life insurance. Enter total average mortlife insurance for yourself. Do not include premiums for insurance	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a \$\\$\$ Subtract Line b from Line a. Expense that you actually incur for acome taxes, self employment taxes es taxes. Int. Enter the total average monthly retirement contributions, union duntary 401(k) contributions. Inthly premiums that you actually per on your dependents, for whole I tal monthly amount that you are re	ation the Average a and enter 0.00 0.00 all federal, s, social ly lues, and ay for term ife or for	\$ \$	500.00
30 31 32	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu Other Necessary Expenses: life insurance. Enter total average mor life insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total approach to the order of a court or administrative agency, such as	e IRS Local Standards: Transporta court); enter in Line b the total of ine 47; subtract Line b from Line a \$ \$ Subtract Line b from Line a. expense that you actually incur for accome taxes, self employment taxes es taxes. ent. Enter the total average monthly retirement contributions, union dutary 401(k) contributions. enthly premiums that you actually pron your dependents, for whole it all monthly amount that you are responsed or child support payments. expense and the total average monthly retirement contributions. enthly premiums that you actually pron your dependents, for whole it all monthly amount that you are responsed or child support payments.	ation the Average a and enter 0.00 0.00 all federal, s, social ly lues, and ay for term ife or for equired to s. Do not child. Enter nent and for	\$	500.00 0.00 100.00

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$	690.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$	300.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	4,175.34
	Subpart B: Additional Living Expense Deductions		
	Note: Do not include any expenses that you have listed in Lines 24-37		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.		
39	a. Health Insurance \$ 0.00		
	b. Disability Insurance \$ 0.00		
	c. Health Savings Account \$ 0.00	Φ.	0.00
	Total and enter on Line 39	\$	0.00
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$		
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$	0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$	0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$	0.00
	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$	0.00

		Subpart C: Deductions for De	bt Payment			
47	Future payments on secured cl own, list the name of creditor, id check whether the payment inclu- scheduled as contractually due to case, divided by 60. If necessary Payments on Line 47.					
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance		
	Cornerstone Federal a. Credit Union	2003 Toyota Camry to be paid at the rate of \$247.77 per month for 36 months		yes ■no		
			Total: Add Lines		\$	148.66
48	motor vehicle, or other property your deduction 1/60th of any am payments listed in Line 47, in or sums in default that must be paid	ims. If any of debts listed in Line 47 are se necessary for your support or the support of ount (the "cure amount") that you must pay der to maintain possession of the property. in order to avoid repossession or foreclosulist additional entries on a separate page.	f your dependents, y the creditor in addi The cure amount wo	you may include in tion to the ould include any		
	Name of Creditor	Property Securing the Debt		the Cure Amount		
	aNONE-		\$	Total: Add Lines	\$	0.00
49	priority tax, child support and al not include current obligations	ty claims. Enter the total amount, divided I mony claims, for which you were liable at a such as those set out in Line 33. enses. Multiply the amount in Line a by the	he time of your ban	kruptcy filing. Do	\$	220.57
50	b. Current multiplier for your issued by the Executive information is available the bankruptcy court.)	ly Chapter 13 plan payment. ur district as determined under schedules Office for United States Trustees. (This at www.usdoj.gov/ust/ or from the clerk of strative expense of chapter 13 case	x Total: Multiply L	5.60	\$	0.00
51		•		ines a and b		
51	Total Deductions for Debt Pay.	ment. Enter the total of Lines 47 through 5			\$	369.23
		Subpart D: Total Deductions f				
52	Total of all deductions from in	come. Enter the total of Lines 38, 46, and 5	1.		\$	4,544.57
	Part V. DETER	MINATION OF DISPOSABLE I	NCOME UND	ER § 1325(b)(2)	
53	Total current monthly income.	Enter the amount from Line 20.			\$	5,033.90
54	payments for a dependent child,	thly average of any child support payments reported in Part I, that you received in acco essary to be expended for such child.			\$	0.00
55		s. Enter the monthly total of (a) all amount ited retirement plans, as specified in § 541(becified in § 362(b)(19).			\$	0.00
56	Total of all deductions allowed	under § 707(b)(2). Enter the amount from	I : 50		\$	4,544.57

	there If ne prov	is no reasonable alternative, describe the special circumstances are special circumstances. If there are special circumstances are special circumstances are special circumstances. Total the exide your case trustee with documentation of these expenses are special circumstances that make such expense necessary.	ces and the result expenses and enters and you must	Iting expenses in lines a-c belower the total in Line 57. You must provide a detailed explanation	ow. ust	
57		Nature of special circumstances Amount of Expense				
	a.		\$			
	b.		\$			
	c.		\$			
			Tot	tal: Add Lines	\$	0.00
58	Tota resul	l adjustments to determine disposable income. Add the ant.	nounts on Lines	54, 55, 56, and 57 and enter t	he \$	4,544.57
59	Mon	thly Disposable Income Under § 1325(b)(2). Subtract Line	58 from Line 5	3 and enter the result.	\$	489.33
		Dont VI ADDITIONAL	EVDENCE	CLAIMS	•	

Part VI. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

60

61

	Expense Description		Monthly Amount
a.	Remainder of Car payment	\$	99.44
b.		\$	
c.		\$	
d.		\$	
	Total: Add Lines a	b, c and d \$	99.44

Part VII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)

Date: **August 1, 2012**

Signature: /s/ David R Kendziora, Sr. David R Kendziora, Sr.

(Debtor)

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